

| POSITION                  | INITIALS | ID NO. | DATE     |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION         | SIMR+T   |        | 10-18-01 |
| O.I.P.E. CLASSIFIER       |          | 10     | 10-31-01 |
| FORMALITY REVIEW          | CH       | 1119   | 11-19-01 |
| RESPONSE FORMALITY REVIEW |          |        |          |

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

| Claim          | Date |
|----------------|------|
| Final Original | 1    |
| 1              | ✓    |
| 2              | ✓    |
| 3              | ✓    |
| 4              | ✓    |
| 5              | ✓    |
| 6              | ✓    |
| 7              | ✓    |
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| 21             | ✓    |
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| 32             | ✓    |
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| Claim          | Date |
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| Final Original | 51   |
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| Claim          | Date |
|----------------|------|
| Final Original | 101  |
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| 149            |      |
| 150            |      |

If more than 150 claims or 10 actions  
staple additional sheet here

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